

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	IC NO.	DATE
FEE DETERMINATION	HA 112		11-30-01
O.P.E. CLASSIFIER		10	12-12-01
FORMALITY REVIEW	KD	124	12-14-200
RESPONSE FORMALITY REVIEW			

# INDEX OF CLAIMS

✓ ----- Rejected      N ----- Non-elected  
 0 ----- Allowed      I ----- Interference  
 - (Through numeral) ... Canceled      A ----- Appeal  
 + ----- Restricted      O ----- Objected

Claim	Final	Original	Date
1	✓	✓	5/11/02
2	✓	✓	5/11/02
3	✓	✓	5/11/02
4	✓	✓	5/11/02
5	✓	✓	5/11/02
6	✓	✓	5/11/02
7	✓	✓	5/11/02
8	✓	✓	5/11/02
9	✓	✓	5/11/02
10	✓	✓	5/11/02
11	✓	✓	5/11/02
12	✓	✓	5/11/02
13	✓	✓	5/11/02
14	✓	✓	5/11/02
15	✓	✓	5/11/02
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47	✓	✓	5/11/02
48	✓	✓	5/11/02
49	✓	✓	5/11/02
50	✓	✓	5/11/02

Claim	Final	Original	Date
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Claim	Final	Original	Date
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Best Available Copy

If more than 150 claims or 10 actions  
 staple additional sheet here

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